

1645\$

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE  
(Case No. 00-1278)

In re Application of:  
Lawton, et al.

Serial No.: 09/765,739

Filed: January 18, 2001

For: Compositions and Methods for Detection  
Of Ehrlichia Canis and Ehrlichia  
Chaffeensis Antibodies

Examiner: V. Ford

Art Unit: 1645

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JUL 31 2003

TECH CENTER 1600/2900

TRANSMITTAL LETTER

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

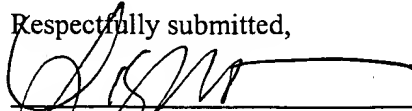
Dear Sir:

In regard to the above identified application,

1. We are transmitting herewith the attached:
  - a) Amendment and Petition for Extension of Time;
  - b) Filing fee; and
  - c) Return postcard
2. With respect to fees:
  - a) A check in the amount of \$930.00 is enclosed.
  - b) Please charge any underpayment or credit any overpayment our Deposit Account, No. 13-2490.
3. GENERAL AUTHORIZATION: Please charge any additional fees or credit overpayment to Deposit Account No. 13-2490. A duplicate copy of this sheet is enclosed.
4. CERTIFICATE OF MAILING UNDER 37 CFR § 1.8: The undersigned hereby certifies that this Transmittal Letter and the paper, as described in paragraph 1, are being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on July 23, 2003.

Date: July 23, 2003

Respectfully submitted,

  
Lisa M.W. Hillman

Registration No. 43,673



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## PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) CENTER 160

ADDRESS TO:  <b>Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450</b>	Attorney Docket No.:	00-1278
	Application No.:	09/765,739
	Filing Date:	January 18, 2001
	First Named Inventor:	Lawton, et al.
	Group Art Unit:	1645
	Examiner:	Ford

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application to and including.

The requested extension and appropriate non-small-entity fee are as follows (check time period desired):

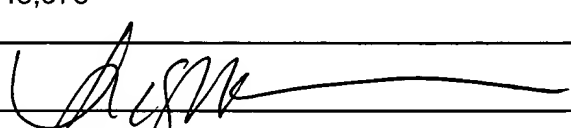
- |                                     |                                  |          |
|-------------------------------------|----------------------------------|----------|
| <input type="checkbox"/>            | One Month (37 CFR 1.17(a)(1))    | \$       |
| <input type="checkbox"/>            | Two Months (37 CFR 1.17(a)(2))   | \$       |
| <input checked="" type="checkbox"/> | Three Months (37 CFR 1.17(a)(3)) | \$930.00 |
| <input type="checkbox"/>            | Four Months (37 CFR 1.17(a)(4))  | \$       |
| <input type="checkbox"/>            | Five Months (37 CFR 1.17(a)(5))  | \$       |

☐ Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$

☒ A check in the amount of the fee is enclosed.

☒ The Commissioner is hereby authorized to charge any fees which may be required or to credit any overpayment to Deposit Account Number 13-2490. I have enclosed a duplicate copy of this sheet.

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED

Name	Lisa M.W. Hillman, Ph.D
Reg. No.	43,673
Signature	
Date	July 23, 2003

EXT (Rev. 1/3/01)

07/30/2003 HTECKLU1 00000028 09765739

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